



Eli Lilly and Company

307 East McCarty Street
Indianapolis, Indiana 46285
(317) 261-2000

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

November 18, 1980

U. S. Environmental Protection Agency
Region II
Information Service Center
26 Federal Plaza
New York, New York 10007

Gentlemen:

RE: Application for a Hazardous Waste Permit
Eli Lilly and Company, Inc.
Mayaguez, Puerto Rico
Identification No. P R T 0 0 0 0 1 0 0 6 6

* In accordance with the requirements of The Resource Conservation and Recovery Act of 1976 (RCRA) we have completed and attached Part A, General and Form 3 RCRA for our Mayaguez facility. In our evaluation of the hazardous waste management practices at this facility, we have determined that Eli Lilly at Mayaguez is both a storer and treater of hazardous wastes as defined by our understanding of the Federal Register, May 19, 1980, Part III, EPA. Most of our hazardous waste storage and treatment facilities have been designed and utilized to accommodate our campaign production basis. These procedures generally cause waste to be stored longer than a 90-day period to permit controlled flow rates to waste treatment facilities (neutralization tank, incinerators, equalization, and aeration).

We have not identified as a hazardous waste the sludge generated from the wastewater treatment facility. After consultation with EPA representatives we opted to request delisting and temporary exclusion for the listed wastes which cause this secondary waste to be considered hazardous by regulation. A copy of our petition request is attached for your convenience. *Region II?*

It is our understanding that the treatment of small quantities of laboratory waste was not intended to be included in the Hazardous Waste Regulatory System. Therefore, we have not included such treatment in our permit application. However, our laboratory procedures include directions for

U. S. EPA

Identification No. PRT 000040857

November 18, 1980 - Page 2

waste collections into proper containers and in-house collection, transportation, and the less-than-90-day storage requirement. Such wastes are periodically collected and either incinerated on-site or landfilled at an approved hazardous waste site.

Please contact Mr. Arlie J. Ullrich (317/261-2120) or Mr. Robinson Garcia (809/832-7846) if you require additional information.

Yours very truly,

ELI LILLY AND COMPANY

A handwritten signature in dark ink, appearing to read "Raymond E. Crandall", written over a horizontal line.

Raymond E. Crandall
Group Vice President

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* Attach.

FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program <i>(Read the "General Instructions" before starting.)</i>	I. EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px;"> F P R T C 0 0 0 4 0 8 5 7 3 D </div>
LABEL ITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION		<div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%;"> PRT000040857 ELI LILLY & CO., INC. MAYAGUEZ, P.R. 00708 </div>	

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X			D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1	SKIP	ELI LILLY AND COMPANY INC. MAYAGUEZ
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IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)		B. PHONE (area code & no.)		
2	VICENTE DIAZ PLANT ENGINEER	809	832	7846

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX		B. CITY OR TOWN	C. STATE	D. ZIP CODE
3	P.O. BOX 1748 RD. NO. #2 KM. 146.7	MAYAGUEZ	PR	00708

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER					B. COUNTY NAME		C. CITY OR TOWN		D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
5	ROAD NO. 2 KM. 146.7	BO SABANETAS	BO SABANETAS	PR	00708						
6	MAYAGUEZ	PR	00708								

FORM 3 RCRA		U.S. ENVIRONMENTAL PROTECTION AGENCY HAZARDOUS WASTE PERMIT APPLICATION Consolidated Permits Program (This information is required under Section 3005 of RCRA.)	I. EPA I.D. NUMBER											
			S F P R T 0 0 0 0 0 4 0 8 5 7 3 1 1 2 13 14 15											

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS
23	24 - 29	

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)		2. NEW FACILITY (Complete item below.)	
<input checked="" type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)		<input type="checkbox"/>	
FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)		FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN	
C	YR. MO. DAY	C	YR. MO. DAY
8	6 6 1 2 0 1		
15	73 74 75 76 77 78	15	73 74 75 76 77 78
B. REVISED APPLICATION (place an "X" below and complete Item I above)		2. FACILITY HAS A RCRA PERMIT	
<input type="checkbox"/> 1. FACILITY HAS INTERIM STATUS		<input type="checkbox"/>	
72		72	

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS		T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:			OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)		
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	ACRE-FEET	A	
LITERS	L	TONS PER HOUR	HECTARE-METER	F	
CUBIC YARDS	Y	METRIC TONS PER HOUR	ACRES	B	
CUBIC METERS	C	GALLONS PER HOUR	HECTARES	Q	
GALLONS PER DAY	U	LITERS PER HOUR			

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

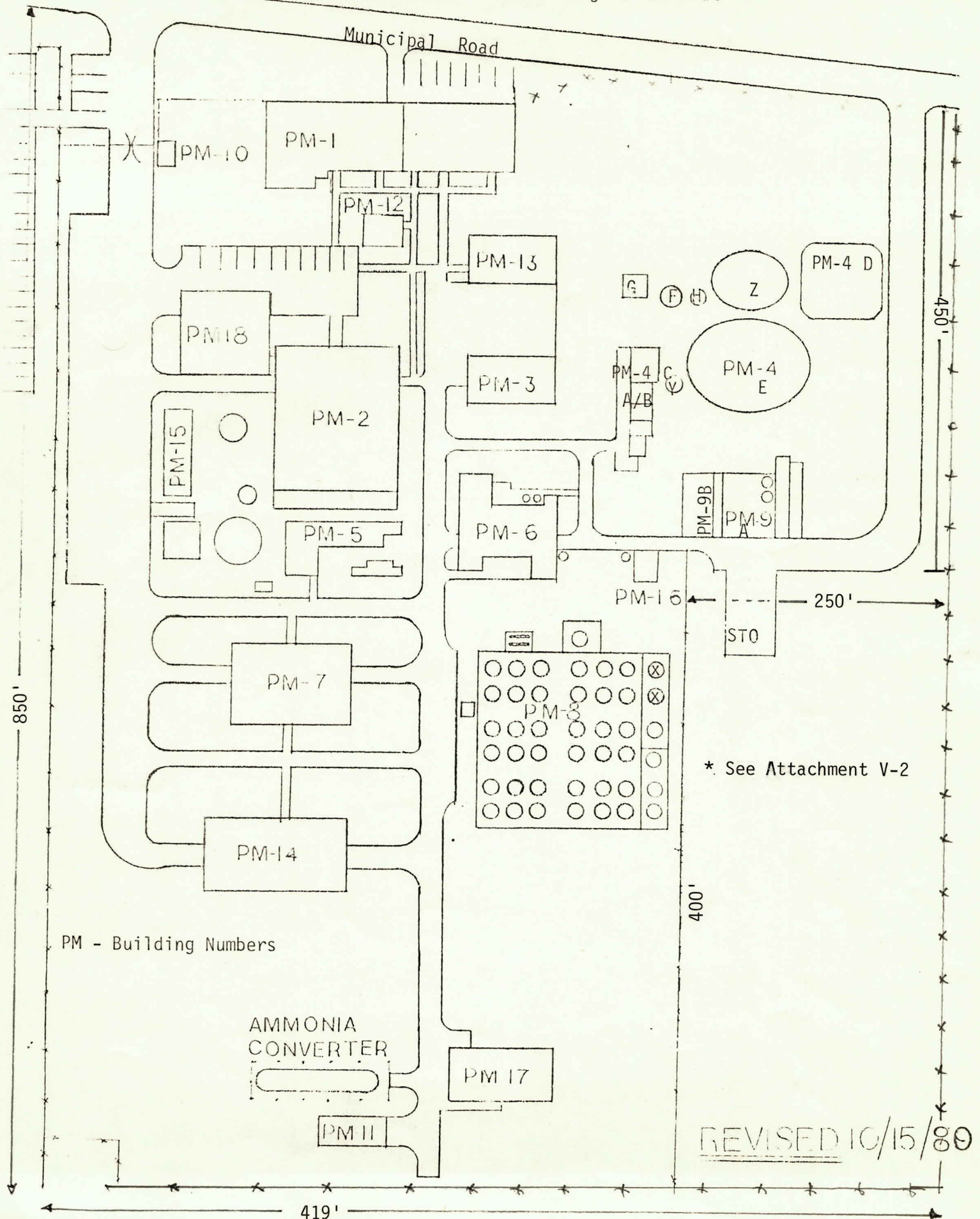
S	D U P												T/A	C
C													I	
1	2											13	14	15
LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY					
		1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)				1. AMOUNT	2. UNIT OF MEASURE (enter code)						
X-1	S 0 2	600	G		5	T 0 4	100,000 000	U						
X-2	T 0 3	20	E		6	T 0 3	400 9600000	E						
1	S 0 1	55,000 000	G		7									
2	S 0 2	84,000 000	G		8									
3					9									
4					10									
16	18	19	27	28	29	32	16	18	19	27	28	29	32	

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY														
S W P R T 0 0 0 0 4 0 8 5 7 3 1 1 2 13 14 15													S W 1 2 13 14 15 23 26														
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																											
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE				C. UNIT OF MEASURE (enter code)	D. PROCESSES																	
										1. PROCESS CODES (enter)						2. PROCESS DESCRIPTION (if a code is not entered in D(1))											
	23	24	25	26	27	28	29	30	31	32	33	34	35	36	27	28	29	27	28	29	27	28	29	27	28	29	
1	F	0	0	2										P	S	0	1	T	0	3							
2	F	0	0	3										T	S	0	2	T	0	3	T	0	4				
3	F	0	0	5										T	S	0	2	T	0	1	T	0	3	T	0	4	
4	D	0	0	2										T	S	0	2	T	0	4							
5	D	0	0	2										T	S	0	2	T	0	4							
6	D	0	0	1										T	S	0	2	T	0	3							
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V. FACILITY DRAWING (see page 4)

See attached drawing of Plant facilities
where Production, Utilities and Adminis-
tration buildings are also shown.

Substitutes Item # V Page 5 Form #3



* ATTACHEMENT V-2

DESCRIPTION AND DIMENSIONS - WASTE TREATMENT FACILITIES

1. PM-4A - Waste Storage Tank (15' x 10')
2. PM-4B - Waste Storage Tank (15' x 10')
3. PM-4C - Neutralization and Equalization (47' x 30')
4. PM-4D - Equalization Lagoon (64' x 64')
5. PM-4E - Oxidation Lagoon (87' x 57')
6. PM-4F - Clarifier (20' diam.)
7. PM-4G - Chlorination (11' x 6')
8. PM-4H - Thickener (15' diam.)
9. PM-4Y - Waste Storage Tank (8' diam.)
10. PM-9A - Brule Incinerator (16' x 50')
11. PM-9B - Thermal Research Incinerator (16' x 61')
12. STO - Drum Storage (60' x 90')
13. X - Waste Storage Tanks (8' diam.)

11/11/80

ELI LILLY AND COMPANY, INC.
MAYAGUEZ PLANT

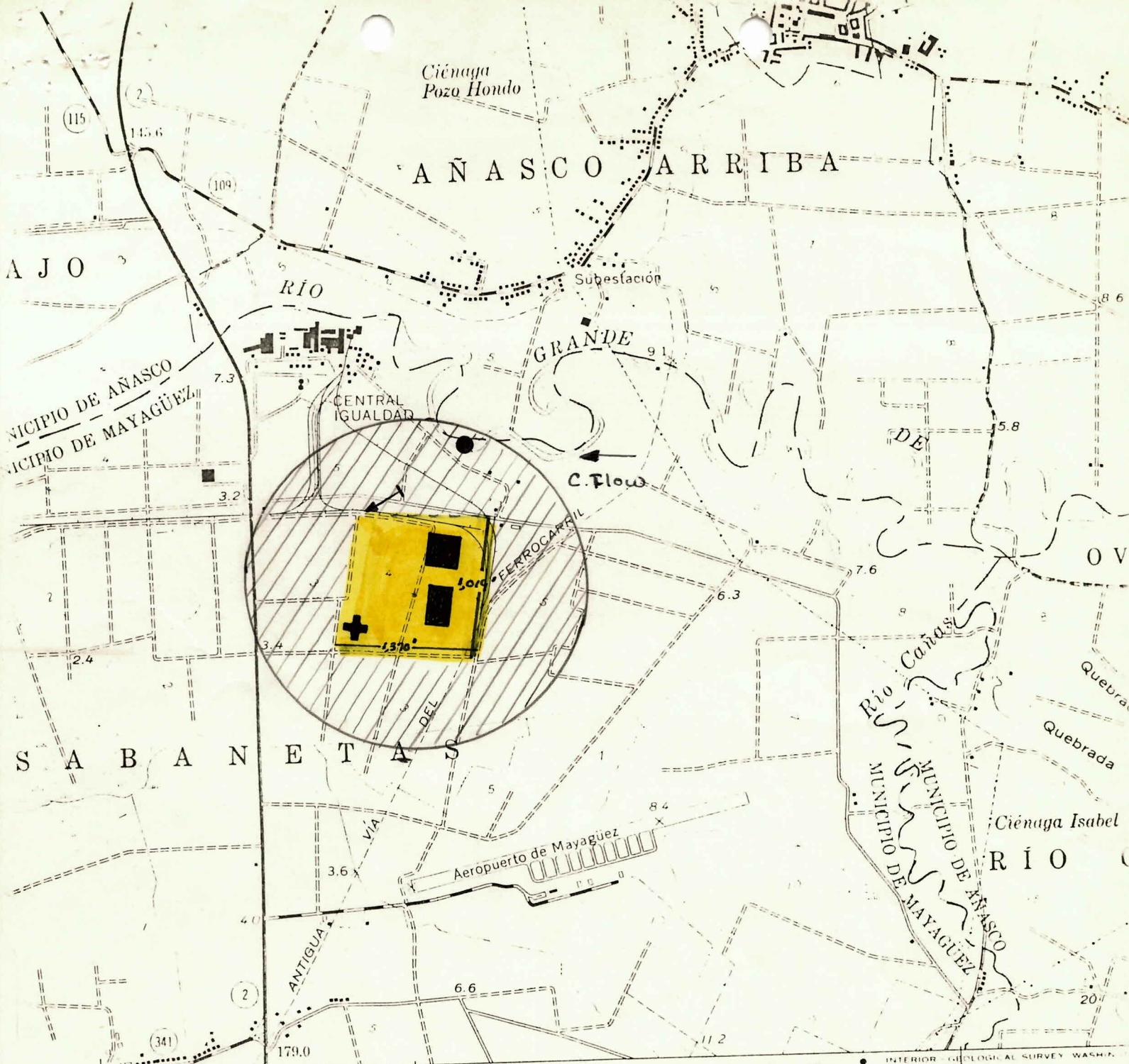
HAZARDOUS WASTE PERMIT APPLICATION








1. Brule Incinerator
2. Thermal Research Incinerator








PM-8 (Storage Tanks)
Tanks 7 and 14 (Waste Storage)



-  City Water intake
-  Wells
-  001 discharge NPDES PR6000353
-  Storage area
-  Waste Treatment Plant



- ROAD CLASSIFICATION
-  Heavy duty
 -  Medium-duty
 -  Light duty
 -  Unimproved
 -  Insular Route

Scale 1 - 20,000

PUERTO RICO
QUADRANGLE LOCATION

Latitude: 18° - 15' - 55"
Longitude: 67° - 09' - 13"

LOCATION MAP
ELI LILLY AND COMPANY, INC. - MAYAGUEZ PLANT